	OTP E 44.3			PTO/SB/21 (04-07)
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	TO THE THE PARTY.	•	Application Number	10/600,061
	TRANSMITTAL		Filing Date	June 20, 2003
	FORM		First Named Inventor	LINA, Cesar Z.
	•		Art Unit	3761
(to be used for all correspondence after initial filing)			Examiner Name	HAND, Melanie Jo
	Total Number of Pages in This Submission	343	Attorney Docket Number	VAC.5671.US .
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Fee Transmittal Form  Fee Attached  Amendment/Reply  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement  Certified Copy of Priority Document(s)  Reply to Missing Parts/ Incomplete Application  Reply to Missing Parts under 37 CFR 1.52 or 1.53		Rem	Drawing(s)  Licensing-related  Petition  Petition to Convertion of Attorne Change of Corre  Terminal Disclain  Request for Refu	I Papers ent to a cation y, Revocat spondence ner and CD(s)	ion e Address	Form	Appea of App Appea (Appea Proprie Status Other below)	I Communication to Board eals and Interferences I Communication to TC. I Notice, Brief, Reply Brief) etary Information Letter Enclosure(s) (please Identify in lieu of PTO/SB/08A/B (3 pgs); nces (335 pgs); ement Postcard.		
			SIGNA	TURE	OF APPLICA	NT, ATT	ORNEY, C	R AG	ENT	
Firm N	ame	Kinetic (	Concepts, Inc.							
Signati	ure	K	elect W. Mo	war						
Printed	name	Robert \	N. Mason				-			
Date		August 8	8, 2007				Reg. No.	42,848	3	140040
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Typed	or printed r	name	Geri Pieper			•			Date	August 8, 2007

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Fees pursuant to the Consolidated Approvide jons Act, 2005 Complete if Known **Application Number** 10/600,061

			Filing Date	June 20, 2003	
For FY	200	)7	First Named Inventor	LINA, Cesar Z.	
Applicant claims small entity s	tatue S	200 37 CED 1 27	Examiner Name	HAND, Melanie Jo	
Applicant claims small entity s	Applicant claims small entity status. See 37 CFR 1.27  AL AMOUNT OF PAYMENT (\$) 180.00	Art Unit	3761		
TOTAL AMOUNT OF PAYMENT	(\$)	180.00	Attorney Docket No.	VAC.5671.US	
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METHOD OF PAYMENT	(check al	that apply)							
Deposit Account Dep	Check Credit Card Money Order None Other (please identify):  Deposit Account Deposit Account Number: 500326  Deposit Account Name: Kinetic Concepts, Inc.  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) in			107 IS TIC		-				
		e(s) or underpayme	nto of fo	-45			cept for the filing fee		
under 37 CFR under 37 CFR WARNING: Information on this finformation and authorization o	1.16 and 1 form may be	.17 ecome public. Credi		· La cucan	t any overpa ot be include	•	ovide credit card		
FEE CALCULATION									
BASIC FILING, SEARCE  Application Type	FILING	FEES Small Entity	SEAF	RCH FEES Small Entity		ATION FEES Small Entity	Para Bail (b)		
Utility Utility	Fee (\$) 300	<u>Fee (\$)</u> 150	<u>Fee (\$</u>		Fee (\$)		Fees Paid (\$)		
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Plant	200	100	300	150	160	80			
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2. EXCESS CLAIM FEES Fee Description Each claim over 20 (in Each independent clair Multiple dependent cla Total Claims	cluding R n over 3 (	(including Reissu		. Doid (ft)		Fee (\$) 50 200 360	Small Entity Fee (\$) 25 100 180		
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3. APPLICATION SIZE F If the specification and d listings under 37 CFI sheets or fraction the Total Sheets - 100 =	lrawings ( R 1.52(e))	), the application 35 U.S.C. 41(a)	size fe	e due is \$250 (\$	\$125 for st  6(s).   or fraction t	nall entity) for thereof Fee	each additional 50		
4. OTHER FEE(S)  Non-English Specifica		•	-	•			Fees Paid (\$)		
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SUBMITTED BY			
Signature	Kellet W. Mason	Registration No. (Attorney/Agent) 42,848	Telephone 210-255-6271
Name (Print/Type	Robert W. Mason		Date August 8, 2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Attorney Docket No. VAC.5671.US



## THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No.

10/600,061

Confirmation No.: 5656

**Applicant** 

LINA, Cesar Z.

Filed

June 20, 2003

TC/A.U.

3761

Examiner

HAND, Melanie Jo

Docket No.

VAC.5671.US

**Customer No.:** 

60402

Mail Stop Amendment **Commissioner for Patents** P.O. Box 1450 Alexandria, VA 22313-1450

## SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT **UNDER 37 C.F.R. § 1.97**

## Dear Sir or Madam:

In compliance with the duty of disclosure set forth in 37 C.F.R. §1.56, Applicant is submitting one form used in lieu of PTO/SB/08A/B (3 pages) along with cited references therein. This Supplemental Information Disclosure Statement is being filed in accordance with 37 C.F.R. §1.97(c)(2). The Commissioner is authorized to charge any required fees to Deposit Account No. 500326.

Under 37 CFR 1.98 (a)(2)(ii) no copies of any mentioned U.S. patents and U.S. patent application publications are submitted. However, if the Office requires copies, applicant will provide in a timely manner.

Application No.10/600,061 Attorney Docket No. VAC.5671.US Supplemental Information Disclosure Statement dated August 8, 2007

Applicant respectfully requests full and proper consideration of the listed information during examination of the application, and that the listed information be printed on any patent that issues therefrom.

Respectfully submitted,

For Applicant

Robert W. Mason, Reg. No.: 42,848 Sr. Intellectual Property Counsel Kinetic Concepts, Inc. Legal Department – Intellectual Property

P.O. Box 659508 San Antonio, Texas 78265-9508

Telephone: 210.255.6271 Facsimile: 210.255.6969

E-mail: robert.mason@kci1.com



## **INFORMATION DISCLOSURE** STATEMENT BY APPLICANT

(Use as many sheets as necessary)

3

Sheet 1 of

Complete if Known						
Application Number	10/600,061					
Filing Date	June 20, 2003					
First Named Inventor	LINA, Cesar Z.					
Art Unit	3761					
Examiner Name	HAND, Melanie Jo					
Attorney Docket Number	VAC.5671.US					

			U.S. PA	TENT DOCUMENTS	
Examiner Initials*	Cite No.1	Document Number  Number-Kind Code <sup>2</sup> ( if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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Examiner Initials*	Cite No.1			Foreign Patent Document  Country Code <sup>3</sup> -Number <sup>4</sup> -Kind Code <sup>5</sup> (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	
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Examiner Signature	Date	
Signature	Considered	
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	INFORMATION DISCLOSURE STATEMENT BY APPLICANT  (Use as many sheets as necessary)  theet 2 of 3	· 🙈 · .	Application Number	10/600,061		
- 11		SCLOSURE	Filing Date	June 20, 2003	_	
S		APPLICANT	First Named Inventor	LINA, Cesar Z.		
				Art Unit	3761	
	(Use as many s	heets as	s necessary)	Examiner Name	HAND, Melanie Jo	
Sheet	2	of	3	Attorney Docket Number	VAC.5671.US	

		FOF	REIGN PATENT	DOCUMENTS		
Examiner Initials*	Cite No.1	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T <sup>6</sup>
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		NON PATENT LITERATURE DOCUMENTS					
Examiner Initials	Cite No.1 Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the iter magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), published and/or country where published.						
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Examiner	Date
Signature	Considered



Substitute for form 1449/PTO				Complete if Known			
				Application Number	10/600,061		
l II	NFORMATIO	N DISC	CLOSURE	Filing Date	June 20, 2003		
STATEMENT BY APPLICANT				First Named Inventor	LINA, Cesar Z.		
				Art Unit	3761		
(Use as many sheets as necessary)			cessary)	Examiner Name	HAND, Melanie Jo		
Sheet	3	of	3	Attorney Docket Number	VAC.5671.US		

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Examiner Initials	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	<b>T</b> <sup>2</sup>
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<sup>\*</sup>EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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Examiner		Date	
Signature		Considered	

<sup>&</sup>lt;sup>1</sup>Applicant's unique citation designation number (optional). <sup>2</sup>Applicant is to place a check mark here if English language Translation is attached.